Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
	Automobile Liability Private Passenger		
	Commercial	17,083,193	0
	Automobile Physical Damag Private Passenger		•
	Commercial	4,063,926	0
	Liability Other Than Auto		
i	Burglary and Theft		
(Glass		
-	Fidelity		
	Surety	***************************************	
	Boiler and Machinery		
	Fire		
ł	Extended Coverage		
ļ	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		<u></u>
(Other		
	Life of Insurance		
	Does filing only apply to certa Classes? If so,	in territory (territories) or	· certain
	specify: No	······································	
	Duine de mandade de Citation d		4.4
	Brief description of filing. (If fi Organization, specify	lling follows rates of an a	lavisory
	organization):	Revised rating logic for	or CA-7247, Filing rating logic fo
	CA7260, Added clarification for CA		
	service trailers as related to our Bo		
	*Adjusted to reflect all prior ra **Change in Company's prem	te changes	
	rates.	ACUITY, A Mutual	I Insurance Company
			me of Company
		Regulatory Filing	
			Official - Title

Form ((R	F-3\

SUMMARY	SHEET
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	Change in Con revision effective		m or rate level 10/01/0	produced by rate		
	(1)			(2) Statewide Annual		(3) Percent Change
	Coverage			Premium Volume *		(+ or -)**
1 Δυ ί	omobile Liability					
	Private Passenger					
	Commercial			\$0		-3.2%
	omobile Physical Dam	age				
	Private Passenger	ugu				
	Commercial			\$0		-2.0%
	oility Other Than Auto	•				
	glary and Theft					
5. Gla						
6. Fid						
7. Sui	•				•	
	ler and Machinery					
9. Fire	_					
	tended Coverage					
	and Marine					
12. Ho	meowners	•				
13. Cc	mmercial Multi-Peril					
14. Cr	op Hail					
15. Ot	her					
	Line of Insurance					
Ooes fili	ing only apply to certai	n territory(s) or	certain class(s	s)? If so, specify:		
Brief de Adoptior	scription of filing. (If fil of ISO's 2008 Revised	ing follows rate Comm'l. Auto Lo	s of an adviso	ry organization, specif	y organizatio ultipliers for:	on):
	Liability =	1.503	and	physical damage =	1.514	
				Garage Dealers =	1.691	

AIG Casualty Company

Name of Company

Joan D. Baskerville, Filings Analyst
Official - Title

^{*} Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Change in Company'	s premium	or rate	level	produced	by	rate
revision effective	1/1/2010)				

Change in Company's premiur revision effective 1/1/201		by rate
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+ or -)**
1. Automobile Liability		
Private Passenger Commercial	1,780,395	0.0%
2. Automobile Physical Damage	1,700,595	
Private Passenger		
Commercial	1,005,899	0.0%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
0. Extended Coverage		
1. Inland Marine		
2. Homeowners		
3. Commercial Multi-Peril		
4. Crop Hail	· · · · · · · · · · · · · · · · · · ·	
5. Other		
Line of Insurance		
Does filing only apply to certain		
If so, specify: The discount asso Passenger Type ve	ociated with this filing e chicles with specified CI	
Brief description of filing. (If	filing follows rates of a	an advigory
organization, specify organization		
With this filing, we are implement Discount. This discount will appl CIDUG codes, as detailed in the fi Analysis, which indicates a 20% di	y to Private Passenger Ty ling. It is supported by	ppes with specific ased on a countrywide
h 244		
* Adjusted to reflect all prior r ** Change in Company's premium lev		

result from application of new rates.

Allstate Indemnity Company	
Name of Company	
Kelly Urban - Senior State Filer	
Official - Title	

(Change in Company's premium or rat	e level produced by rate revision effective	7.1 8/8/2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger		
	Commercial	597,185	+6.4 (estimated)
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	118,287	+10.5 (estimated)
3.	Liability Other Than Auto	-	
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (to	erritories) or certain classes? If so, specify:	
	lescription of filing. (If filing follows rate revision - updating LCM's.	s rates of an advisory organization, specify of	organization):
	djusted to reflect all prior rate change nange in Company's premium level w		

American Economy Insurance Company

Name of Company

Tameaka S. Stover State Filings Sr. Analyst

Official - Title

result from application of new rates.

FORM (RF-3)

Change in Company's prem Effective October 1, 2009	ium or rate level produce	ed by rate revision
(1)	(2)	(3)
•	Annual Premium	Percent
Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial	\$ 6,550,252	+0.2%
2. Automobile Physical Damage		
Private Passenger		
Commercial	\$ 2,418,056	+10.4%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Does filing only apply to certain territo If so, specify: Brief description of filing. (If filing follo Organization, specify organization): E	ows rates of an advisory	
*Adjusted to reflect all prior rate chan	ges.	
**Change in Company's premium level		
result from application of new rates.		
	AMFRICA	N FAMILY MUTUAL INS. CO.
		Name of Company
	James P.	- •
		Official - Title
	James P M	eyer, ACP, AIM
		•
	Semor Pric	ing Analyst/Filings

Cha	ange in Company's premium or rate leve	I produced by rate revision effective	09-8-2009 NB,09-08-2009 RB
	(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
١.	Passenger Commercial	\$462,929	6.0%
2.	Automobile Physical Damage	V 102,020	
	Private Passenger Commercial	\$159,966	7.6%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Do	es filing only apply to certain territory (te	rritories) or certain classes? If so, specify:	All Territories
Brid N/A	· · · · · · · · · · · · · · · · · · ·	tes of an advisory organization, specify orga	anization): Revision of LCMs
*Ac	djusted to reflect all prior rate changes. Change in Company's premium level whi	ch will result from application of new rates.	
		American Fi	re and Casualty Company
			me of Company
		Sarah Lawrence, S	Sr. Technician, Regulatory Filing
	•		Official – Title

Form (RF-3)	SUMMARY SHEET	·
Change in Company's premi revision effective	um or rate level produced by rate	
(1)	(2) Statewide Annual	(3) Percent Change
Coverage	Premium Volume *	(+ or -)**
Automobile Liability Private Passenger		
Commercial	(\$954,338)	-3.2%
2. Automobile Physical Damage		
Private Passenger	#40 500	-2.0%
Commercial	\$49,523	-2.070
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		Carrier Committee Committe
6. Fidelity		
7. Surety		
 Boiler and Machinery Fire 		
10. Extended Coverage11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other	· · · · · · · · · · · · · · · · · · ·	
Line of Insurance		
Does filing only apply to certain territory(s) o	or certain class(s)? If so, specify:	
Brief description of filing. (If filing follows rat Adoption of ISO's 2008 Revised Comm'l. Auto L	tes of an advisory organization, specify orgar loss Costs, using our current loss cost multipliers	nization): s for:
Liability = 1.503	and physical damage = 1.514	
· · · · · · · · · · · · · · · · · · ·	Garage Dealers = 1.691	

ISO Reference Filing #(s):

CA-2009- BRLA1

American Home Assurance Company

Name of Company

Joan D. Baskerville, Filings Analyst

^{*} Adjusted to reflect all prior rate changes.

^{**} Change in Company's premium level which will result from application of new rates.

Form (RF-3)			SUI	MMARY SHEET	
Change in Company's prem revision effective			ium or rate level produced by rate 10/01/09		
	(1)			(2) Statewide Annual	(3) Percent Change
	Coverage	<u> </u>		Premium Volume *	(+ or -)**
1.	Automobile Liability Private Passenger				
	Commercial			\$ 0	-3.2%
2.	Automobile Physical Dam	age			
	Private Passenger				
	Commercial			\$0	-2.0%
3.	Liability Other Than Auto				
4.	Burglary and Theft				
5.	Glass				
6.	Fidelity				
7.	Surety				
8.	Boiler and Machinery				
9.	Fire				
10.	Extended Coverage				
11.	Inland Marine				
12.	Homeowners				
13.	Commercial Multi-Peril				
14.	Crop Hail				
15.					<u> </u>
	Line of Insurance				
Doe	es filing only apply to certain	n territory(s) or	certain class(s)? If so, specify:	
		_		y organization, specify organi our current loss cost multipliers physical damage = 1.136	
				Garage Dealers = 1.268	
	SO Reference Filing #(s):	CA-2009- BI	RLA1		
	Adjusted to reflect all prior of Change in Company's prem		h will result fro	m application of new rates.	
		American In	ternational Sout	h Insurance Company	

Joan D. Baskerville, Filings Analyst
Official - Title

Name of Company

(Change in Company's premium or rate	e level produced by rate revision effective	7.1% 8/8/2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	3,604,369	6.4% (estimated)
2.	Automobile Physical Damage Private Passenger		
	Commercial	800,434	10.1% (estimated)
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (te	erritories) or certain classes? If so, specify:	
	lescription of filing. (If filing follows rate revision - updating LCM's.	rates of an advisory organization, specify of	organization):
** Cl	djusted to reflect all prior rate changes nange in Company's premium level when the sult from application of new rates.		

American States Insurance Company

Name of Company

Tameaka S. Stover State Filings Sr. Analyst

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate leve	I produced by rate revision effective	October 1, 2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
Automobile Liability Private Passenger Commercial	449,238	-4.2%
2. Automobile Physical Damage		1.00/
	120,641	4.8%
3. Liability Other Than Auto		
4. Burglary and Theft5. Glass	-	All the second s
C Fidelia.		
7. Surety		
9 Poilor and Machinery		
O Fine		
10 Extended Coverne		
10 Hamaaumana		
40. Common and all Market Double	499744	
14 Cron Hail		
15. Other		
Line of Insurance		
Desa filia a cala caraba ta caraba da caraba d		No
Does filing only apply to certain territory (ter	rntones) or certain classes? If so, specify: I	NO
Brief description of filing. (If filing follows rate Adopt ISO Loss Cost circular LI-CA-2009-	es of an advisory organization, specify org 082 (CA-2009-BRLA1)	anization):
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which		e Insurance Company
		ame of Company
	•••	
	Joan Walters	s – Compliance Analyst II
		Official – Title

Change in Company's premium or rate level produced by rate revision effecti		October 1, 2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial	645,053	-4.2%
2. Automobile Physical Damage	455.252	4.8%
Private Passenger Commercial 3. Liability Other Than Auto		4.078
4 D	-	
E Class		
C Cidalia.		
8. Boiler and Machinery		
O Elma		
10 Estandad Cassana		
44 Internal Manine		
40 Commonstal Multi Davil		
14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to certain territory (terr	itories) or certain classes? If so, specify: N	No
Does ming only apply to certain territory (terr	nones) or certain classes: if so, specify.	10
Brief description of filing. (If filing follows rate	s of an advisory organization, specify organization	anization):
Adopt ISO Loss Cost circular LI-CA-2009-0	82 (CA-2009-BRLA1)	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	n will result from application of new rates.	
The second of th		
	Amerisure Mu	itual Insurance Company
		ame of Company
	In 18/-14	Compliance Analyst II
	Joan waiters	- Compliance Analyst II Official - Title
		Onicial - Title

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
			-
1.	Automobile Liability Private Passenger		
	Commercial	\$1,460,580	-5.2%
2.	Automobile Physical Damage	\$1,400,380	-3.270
2.	Private Passenger		
	Commercial	\$171,609	2.6%
2		\$171,009	2.070
3. 4.	Liability Other Than Auto Burglary and Theft		
4. 5.	Glass		
5. 6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		The state of the s
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Dogs f	iling only apply to cortain territory (t	erritories) or certain classes? If so, specify:	
N/A	• • • • • • • • • • • • • • • • • • • •	entiones) of certain classes. If so, specify.	
11/7			
Arcl ISO	n Insurance Company, a memb	s rates of an advisory organization, specify of er of Insurance Services Office, Inc. revision as contained in ISO Reference	(ISO), is filing to adopt

Arch Insurance Company
Name of Company

Kathleen M. Ruocco, Compliance Analyst
Official - Title

^{*} Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/01/0200 2009 .

	. (1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		· •
	Commercial	1,033,323	-1.0%
3.	Liability Other Than Auto	-	
1.	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		<u> </u>
9.	Fire	**************************************	
0.	Extended Coverage		
11.	Inland Marine		A THE RESIDENCE OF THE PROPERTY OF THE PROPERT
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
J.	Life of Insurance		
*	the of insurance		
7	Does filing only apply to certain Classes? If so,	n territory (territories) or	certain
	specify: No		
	Brief description of filing. (If fil Organization, specify organization):		dvisory mmercial auto physical damage
	rates by the amount of insurance. \		
	now we will be applying a separate		
	*Adjusted to reflect all prior rat **Change in Company's premi	e changes.	t from application of new
	rates.	_	
		Canal Insurance Co	
			ne of Company
			ine - Compliance Analyst
		C	Official – Title

Form	(RF-3	١

SUMMAR	Y SHEET
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	Change in Com revision effective		m or rate level 10/01/09	produced by rate		
	(1)			(2) Statewide Annual		(3) Percent Change
	Coverage	,,,,,,,		Premium Volume *	•	(+ or -)**
1.	Automobile Liability					
	Private Passenger			_		
	Commercial			\$1,510,234		-3.2%
2.	Automobile Physical Dama	age			-	
	Private Passenger					
	Commercial			\$201,069	_	-2.0%
3.	Liability Other Than Auto				_	
	Burglary and Theft				_	
	Glass				_	
	Fidelity				_	
	Surety				-	
	Boiler and Machinery				_	
	Fire				-	
-	Extended Coverage				-	
	Inland Marine			-	_	
	Homeowners				_	
13.	Commercial Multi-Peril				- -	
	Crop Hail				_	
	Other				- -	
	Line of Insurance		 		_	
)oe	s filing only apply to certain	n territory(s) or	certain class(s	s)? If so, specify:		
3rie	f description of filing. (If fili otion of ISO's 2008 Revised (ng follows rate Comm'l. Auto Lo	es of an adviso	ry organization, specif our current loss cost m	fy organizati ultipliers for:	on):
	Liability =	1.503	and	physical damage =	1.514	
				Garage Dealers =	1.691	
	SO Reference Filing #(s):	CA-2009- B	DI A4			

Commerce and Industry Insurance Company

Name of Company

Joan D. Baskerville, Filings Analyst

^{*} Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Change in Company's premium or rate level	produced by rate revision effective	09-01-2009 NB, 11-1-2009 RB
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
Automobile Liability Private		
Passenger Commercial	\$3,526,890	4.5%
Automobile Physical Damage		
Private Passenger Commercial	\$1,221,148	10.2%
Liability Other Than Auto		
Burglary and Theft Glass		
5. Glass 5. Fidelity		
. Surety		
Boiler and Machinery		
. Fire		
0. Extended Coverage	- 1 M-	
1. Inland Marine		
2. Homeowners		
3. Commercial Multi-Peril		
4. Crop Hail		
5. Other		
Line of Insurance		
oes filing only apply to certain territory (ter	ritories) or certain classes? If so, specify	All territories.
Brief description of filing. (If filing follows rate tevision of Commercial Cars LCMs.	es of an advisory organization, specify o	rganization):
Adjusted to reflect all prior rate changes.		
*Change in Company's premium level whic	h will result from application of new rate	S.
	Consol	idated Insurance Company
		Name of Company
	Sarah Lawrenc	e, Sr. Technician, Regulatory Filing
		Official – Title

Change in	Company's	premium	or	rate	level	produced	by	rate
	effective							

-		
(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
Coverage	volume (IIIIIoIs)	charge (+ or)
1. Automobile Liability		
Private Passenger Commercial	\$119,745	-5.6%
2. Automobile Physical Damag		
Private Passenger		
Commercial	\$96,503	5.4%_
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity 7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	-	
13. Commercial Multi-Peril		
14. Crop Hail 15. Other		
Line of Insurance	Α	
Does filing only apply to centric N/A	rtain territory (territories)or	certain classes?
Brief description of filing. organization, specify organi	February 1, 2010, we the loss costs in ISC CA-2009-BRLA1.	would like to adopt Reference File Number multipliers of 1.39 and 1.92 for auto
* Adjusted to reflect all p ** Change in Company's premiresult from application o	um level which will	ny
u29219D	Official - Tit	
u:/e./ : u:1		

Section 754 EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change i	n Company's	premium or	rate level	produced by	rate revision
effective	10/01/2009				

(1)	(2) Annual Premium	(3) Percent
Coverage -	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private Passenger		
Commercial	213,089	-5.2%
Automobile Physical Damag Private Passenger		
Commercial	56,452	2.6%
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Life of Insurance		
Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
specify: No. Char	nge applies statewide.	
Brief description of filing. (If fi	ling follows rates of an ac	dvisory
Organization, specify		
organization):	Adoption of ISO Designation	on CA-2009-BRLA1
*Adjusted to reflect all prior ra	te changes.	
	ium level which will resul	

Name of Company
Sharon Kennedy, Compliance Analyst

Official – Title

Change in Company's premium or rate level produced by rate revision effective		4-1-2010	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private Passenger Commercial	\$303,639	0%	
2. Automobile Physical Damage	#70.40F	0%	
	\$70,185		
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. OtherLine of Insurance			
Line of Insurance			
	(touttoutes) an entain alcono 0 if an engal		
Does filing only apply to certain territory	(territories) or certain classes? If so, speci	iry:	
	U.S.A.		
Priof description of filing (If filing follows	rates of an advisory organization, specify	organization):	
	sion to 50% credit or debit.		
Comm Auto Schedule Rating Flan Revis	Sion to 50 % credit of debit.		
*Adjusted to reflect all prior rate change	9		
	which will result from application of new ra	tes.	
Change in Company o premium rever			
	Employers	Insurance Company of Wausau	
		Name of Company	
	Lori Hartleben	Senior State Filings Analyst	
		Official – Title	

Change in Company's premium or rate level produced by rate revision effective		12-1-2009	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private Passenger Commercial	\$198,964	-9.1%	
2. Automobile Physical Damage	A54.057	1.0%	
Private Passenger Commercial		1.0%	
4 5 1			
E Oless			
6 Fidelik			
7 Curoh			
O Fine			
		- Marie - Mari	
4 0.11			
15. OtherLine of Insurance			
Line of insurance			
Does filing only apply to certain territory (terr	ritories) or certain classes? If so, specify:		
Tool ming only apply to contain terminally (term			
Brief description of filing. (If filing follows rate	es of an advisory organization, specify or	ganization):	
Adopt ISO Loss Costs and amend LCMS's			
*A P. A. I.A. or Contain all a decorate also assessed			
*Adjusted to reflect all prior rate changes.	b will recult from analication of new rates		
**Change in Company's premium level which	n will result from application of new rates	•	
	Employers Ins	urance Company of Wausau	
		Name of Company	
	·		
	Lori Hartleben	Senior State Filings Analyst	
		Official – Title	

Change in Company's premium or rate level produced by rate revision effective		12-1-2009	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private Passenger Commercial	\$234,294	0.4%	
Automobile Physical Damage Private Passenger Commercial		-5.2%	
 Liability Other Than Auto Burglary and Theft 			
F Class			
6 Fidelik			
O D-11. IAA 11			
9. Fire			
	A Paris Toronto Toront		
· · · · · · · · · · · · · · · · · · ·			
15. OtherLine of Insurance			
Line of Insurance			
Does filing only apply to certain territory (terri	tories) or certain classes? If so, specify	/:	
Brief description of filing. (If filing follows rates Adopt ISO Loss Costs and amend LCMS's	s of an advisory organization, specify o		
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	will result from application of new rate	s.	
	The First Li	berty Insurance Corporation	
		Name of Company	
	Lori Hartleben	Senior State Filings Analyst	
		Official – Title	

(Change in Company's premium or rate	e level produced by rate revision effective	7.5% 8/8/2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	1,360,851	6.7% (estimated)
2.	Automobile Physical Damage		
	Private Passenger Commercial	436,805	9.6% (estimated)
3.	Liability Other Than Auto	430,803	9.070 (Cstimated)
<i>3</i> . 4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (te	erritories) or certain classes? If so, specify:	
		rates of an advisory organization, specify	
2009	rate revision - updating LCM's.		
* A	djusted to reflect all prior rate changes	S. Link:11	
	hange in Company's premium level was sult from application of new rates.	nich will	

First National Insurance Company of America

Name of Company

Tameaka S. Stover State Filings Sr. Analyst

(Change in Company's premium or rate	level produced by rate revision effective	7.2% 8/8/2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger		
	Commercial	1,274,694	6.5% (estimated)
2.	Automobile Physical Damage Private Passenger		
	Commercial	263,663	10.1% (estimated)
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (ter	ritories) or certain classes? If so, specify:	
* Ac	description of filing. (If filing follows rate revision - updating LCM's. djusted to reflect all prior rate changes nange in Company's premium level who sult from application of new rates.		organization):
	••		

General Insurance Company of America

Name of Company

Tameaka S. Stover
State Filings Sr. Analyst
Official - Title

orm (RF-3)		SU	MMARY SHEET	
Change in Co revision effecti		n or rate leve 10/01/0	produced by rate	
(1)			(2) Statewide Annual	(3) Percent Chang
Coverage			Premium Volume *	(+ or -)**
Automobile Liability				
Private Passenger				
Commercial			\$1,256,413	-3.2%
2. Automobile Physical Da	mage			
Private Passenger	J			
Commercial			\$269,933	-2.0%
3. Liability Other Than Auto	1			
4. Burglary and Theft	•			
5. Glass				
6. Fidelity				
7. Surety 8. Boiler and Machinery				
9. Fire				
9. File 10. Extended Coverage				
11. Inland Marine				
				
14. Crop Hail				
15. Other Line of Insurance				
Line of insurance	C			
Does filing only apply to cert			s)? If so, specify: ory organization, specify organ	nization):
Adoption of ISO's 2008 Revise	d Comm'l. Auto Lo	ss Costs, using	our current loss cost multipliers	s for:
Liability =	1.503	and	physical damage = 1.514 Garage Dealers = 1.691	
ISO Reference Filing #(s):	CA-2009- BF	31 A.4		

Granite State Insurance Company

Name of Company

Joan D. Baskerville, Filings Analyst

^{*} Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

form (RF-3)			SUMMA	ARY SHEET	
	Change in Co revision effective	mpany's premium /e	or rate level pro 10/01/09	duced by rate	
	(1)			(2) Statewide Annual	(3) Percent Change
,	Coverage	12 71	<u> </u>	Premium Volume *	(+ or -)**
Automote Private	bile Liability te Passenger				
	nercial		- -	\$6,483,539	-3.2%
2. Automol	bile Physical Dar	mage	_		
	te Passenger		-		0.00/
	mercial		-	\$328,314	-2.0%
•	Other Than Auto)	-		
	and Theft		-		
5. Glass			-		
6. Fidelity			-		
7. Surety					
	nd Machinery		-		
9. Fire			-		
	ed Coverage			· · · · · · · · · · · · · · · · · · ·	<u></u>
11. Inland I			•		
12. Homeo					
	ercial Multi-Peril				
14. Crop H	ail				
15. Other			 .		
	Line of Insurance	€			
D (!!!	mb. ammb. 45 -55-4-	in toultou/s\	outsin alssa/s\0	If an annaihe	
Does ming of	пу арру то сепа	in territory(s) or c	enam ciass(s)?	ii au, apauliy.	
				rganization, specify organ	
Adoption of IS				current loss cost multiplier	
	Liability =	1.503	and	physical damage = 1.514 Garage Dealers = 1.691	
				Garage Dealers = 1.691	

Illinois National Insurance Co.	
Name of Company	

Joan D. Baskerville, Filings Analyst

^{*} Adjusted to reflect all prior rate changes.

^{**} Change in Company's premium level which will result from application of new rates.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	te level produced by rate revision
effective 10/01/2009	•

(1)	(2) Annual Premium	(3) Percent
Coverage -	Volume (Illinois) *	_ Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial	117,736	-5.38%
Automobile Physical Damag		
Private Passenger		
Commercial	39,111	+5.81%
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other	**************************************	
Life of Insurance		
Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
specify: No		
Brief description of filing. (If fi	iling follows rates of an a	dvisory
organization):	adopt ISO Filing refere	ence CA-2009-BRLA1 - Loss Cos
Revision - the effective date is 10-		
1 (01) Oli	. co.t and i i fort the abt	2.0Doro are arr commute

Name of Company
Robert L Haney - President of Rain and Hail L.L.C.
Official – Title

^{**}Change in Company's premium level which will result from application of new rates.

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate lev	el produced by rate revision effective	09-01-2009 NB, 11-1-2009 RB
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial	\$2,107,771	3.6%
2.	Automobile Physical Damage		
_	Private Passenger Commercial	\$764,548	9.4%
3.	Liability Other Than Auto		
4. 5.	Burglary and Theft Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
	Homeowners	10	
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Do	os filing only apply to cortain tarritony (to	erritories) or certain classes? If so, specify:	All togitories
טט		eritories) or certain classes: il so, specify.	
Brie	ef description of filing. (If filing follows ra	ates of an advisory organization, specify org	
Rev	sion of Commercial Cars LCMs.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	ljusted to reflect all prior rate changes. hange in Company's premium level wh	ich will result from application of new rates	
		Indian	a Insurance Company
		<u> </u>	lame of Company
		Sarah Lawrence	, Sr. Technician, Regulatory Filing
			Official - Title

Form	(RF-3)
------	--------

Change in Company's				
revision effective	premium or rate leve 10/01/0			
, , , , , , , , , , , , , , , , , , , ,			•	
(1)	•	(2) Statewide Annual		(3) Percent Change
Coverage		Premium Volume	* -	(+ or -)**
1. Automobile Liability				
Private Passenger				
Commercial		\$1,562,397	-	-3.2%
2. Automobile Physical Damage		Ψ1,002,007	_	
Private Passenger				
Commercial		\$87,042	-	-2.0%
3. Liability Other Than Auto		φ07,042	-	2.070
4. Burglary and Theft			-	
5. Glass			-	
			•	
6. Fidelity			-	
7. Surety			-	
8. Boiler and Machinery9. Fire			-	
			-	
10. Extended Coverage			_	
11. Inland Marine			-	
12. Homeowners			-	
13. Commercial Multi-Peril			_	
14. Crop Hail			_	
15. Other			_	
Line of Insurance				
Does filing only apply to certain territo	ry(s) or certain class(s)? If so, specify:		
Brief description of filing. (If filing folio				on):
Adoption of ISO's 2008 Revised Comm'l.	· · · · · · · · · · · · · · · · · · ·			
Liability = 1.50	3 and	physical damage =		
			4 004	
ISO Reference Filing #(s): CA-	2009- BRLA1	Garage Dealers =	1.691	

The Insurance Company of the State of Pennsylvania

Name of Company

Joan D. Baskerville, Filings Analyst

^{*} Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level	12-1-2009	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial	\$342,620	0.4%
Automobile Physical Damage Private Passenger Commercial	\$103,142	-5.2%
3. Liability Other Than Auto		
4. Burglary and Theft	· · · · · · · · · · · · · · · · · · ·	
5. Glass		
6. Fidelity		
0 0 " 144 11		
9. Fire		
10. Extended Coverage		
11 Inland Marina		
12. Homeowners		
40.0		
15. Other Line of Insurance		
Line of Insurance		
Does filing only apply to certain territory (terri	itories) or certain classes? If so, specify	r
Does ming only apply to certain territory (terri	nones) or certain classes: if so, specing	·
Brief description of filing. (If filing follows rate Adopt ISO Loss Costs and amend LCMS's	s of an advisory organization, specify o	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	• •	Insurance Corporation
		Name of Company
	Lori Hartleben	Senior State Filings Analyst
		Official – Title

Change in Company's premium or rate level	12-1-2009	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial	\$5,066,100	0.4%
Automobile Physical Damage	0047.704	E 00/
Private Passenger Commercial		-5.2%
3. Liability Other Than Auto4. Burglary and Theft		
E Class	- A - A - A - A - A - A - A - A - A - A	
A F11 III		
7. Surety		
O Dellas and Marchiness		
O Fire		
	in the second se	
14. Crop Hail 15. Other		
Line of Insurance	La contraction de la contracti	
Does filing only apply to certain territory (terri	tories) or certain classes? If so, spec	ify:
		- Control of the Cont
Brief description of filing. (If filing follows rate	e of an advisory organization, specify	organization):
Adopt ISO Loss Costs and amend LCMS's	s of all advisory organization, specify	
Adopt 100 E033 C03t3 and amend E0Me 3		
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level which	will result from application of new ra	tes.
	Liberty Mi	utual Fire Insurance Company
		Name of Company
	Lori Hartleben	Senior State Filings Analyst
		Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate le	12-1-2009	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial	\$541,677	25.6%
Automobile Physical Damage Private Passenger Commercial	\$88,569	18.5%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine 12. Homeowners		Control of the Contro
13. Commercial Multi-Peril		
44 One of 11-9		
45 00		
Line of Insurance		
Does filing only apply to certain territory (territories) or certain classes? If so, speci-	fy:
Brief description of filing. (If filing follows	rates of an advisory organization, specify	organization):
Adopt ISO Loss Costs and amend LCMS	.'s	

*Adjusted to reflect all prior rate changes		00
"Change in Company's premium level w	hich will result from application of new rat	es.
	Liborty N	Mutual Insurance Company
	Liberty	Name of Company
	Lori Hartleben	Senior State Filings Analyst
		Official – Title

Change in Company's premium or rate level produced by rate revision effective		12-1-2009	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private Passenger Commercial	\$531,099	-18.4%	
Automobile Physical Damage Private Passenger Commercial	\$60,432	-23.0%	
 Liability Other Than Auto Burglary and Theft 			
E Olassa			
A F : 1 0:			
7. Surety			
44 Internal Marchae			
11. Inland Marine 12. Homeowners			
40 On many and at Mark! Don!			
44 Coon Hail		to the second se	
15. Other			
15. Other Line of Insurance			
Does filing only apply to certain territory (terr	itories) or certain classes? If so, specif	fy:	
Brief description of filing. (If filing follows rate Adopt ISO Loss Costs and amend LCMS's			
Adopt 130 Loss Costs and amend LCM3's			
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	n will result from application of new rate	es.	
	I M	Insurance Corporation	
	LIVI	Name of Company	
	Lori Hartleben	Senior State Filings Analyst	
		Official - Title	

SUMMARY SHEET

(Change in Company's premium or rate	level produced by rate revision effective	e 11/1/2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change $(+ \text{ or } -)^{**}$
	Automobile Liability		
	Private Passenger		
	Commercial	143,995	-4.5%
	Automobile Physical Damage		
	Private Passenger		
	Commercial	28,487	+6.0%
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other Line of Insurance		
	description of filing. (If filing follows otion of ISO Loss Cost Revision CA-2	rates of an advisory organization, speci-	fy organization):
2	djusted to reflect all prior rate changes hange in Company's premium level whealt from application of new rates.		
			rkel American Insurance npany
		.	Name of Company
			dre I. Balbuena, Product & Regulatory Services
			Official - Title

	Change in Company's premium or rate	level produced by rate revision effective	e 11/1/2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change $(+ \text{ or } -)^{**}$
1.	Automobile Liability		
	Private Passenger		
	Commercial	161,191	-4.5%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	31,694	+6.0%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Line of Insurance		
	Line of insurance		
Does	filing only apply to certain territory (te	rritories) or certain classes? If so, speci-	fy:
		rates of an advisory organization, speci-	fy organization):
Ado	ption of ISO Loss Cost Revision CA-2	009-BRLA1	
* A	division de la magneta all maiori meta alternacio		
	djusted to reflect all prior rate changes thange in Company's premium level where the company is the company of the company is the company of the c		
	esult from application of new rates.	iicii wiii	
10	csult from application of new rates.		
		_ Ma	rkel Insurance Company
			Name of Company
		Dei	dre I. Balbuena,
			Product & Regulatory Services
			Official - Title

orm (RF-3)	SUMMARY SHEET	
Change in Company's pren	nium or rate level produced by rate 10/01/09	
revision effective	10/01/09	
(1)	(2)	(3) Percent Change
Coverage	Statewide Annual Premium Volume *	(+ or -)**
Automobile Liability		
Private Passenger		
Commercial	\$578,900	-3.2%
2. Automobile Physical Damage	-	
Private Passenger		
Commercial	\$12,625	-2.0%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
0. Extended Coverage		
1. Inland Marine		
2. Homeowners		
3. Commercial Multi-Peril		
4. Crop Hail		
l5. Other		
Line of Insurance		
loes filing only apply to certain territory(s)	or certain class(s)? If so, specify:	

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO's 2008 Revised Comm'l. Auto Loss Costs, using our current loss cost multipliers for:

Liability =	1.503	and	physical damage =	1.514
			Garage Dealers =	1.691
ISO Reference Filing #(s):	CA-2009- BRLA1			

^{*} Adjusted to reflect all prior rate changes.

National Union Fire Insurance Company of Pittsburgh, Pa.

Name of Company

Joan D. Baskerville, Filings Analyst

^{**} Change in Company's premium level which will result from application of new rates.

Ch	ange in Company's premium or rate lev	rel produced by rate revision effective	09-01-2009 NB, 11-1-2009 RB
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial	\$8,611,991	5.4%
2.	Automobile Physical Damage	\$0,011,001	3.470
	Private Passenger Commercial	\$2,465,699	12.1%
3.	Liability Other Than Auto	42,100,000	12.170
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		Automorphism (Automorphism)
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		- MARKAGE LEE
	Line of Insurance		
Doe	es filing only apply to certain territory (te	erritories) or certain classes? If so, specify:	All territories.
Brie Revi	of description of filing. (If filing follows rasion of Commercial Cars LCMs.	ites of an advisory organization, specify org	ganization):
*Ad _.	justed to reflect all prior rate changes. nange in Company's premium level wh	ch will result from application of new rates.	
		The Nether	lands Insurance Company
			ame of Company
		Sarah Lawrence,	Sr. Technician, Regulatory Filing
			Official – Title

orm (RF-	3)		SU	MMARY SHEET	
	Change in Cor	mpany's premit	ım or rate leve	l produced by rate	
	revision effective	е	10/01/0	09	
	(1)			(2) Statewide Annual	(3) Percent Chango
	Coverage			Premium Volume *	(+ or -)**
1. Autor	nobile Liability				
	vate Passenger				
	mmercial			\$5,014,029	-3.2%
	nobile Physical Dan	nage			
	vate Passenger	~9 ~			
	mmercial			\$212,282	-2.0%
	lity Other Than Auto				
	lary and Theft				
5. Glass	•				
6. Fidel					
7. Sure	•				
	r and Machinery				
9. Fire	nded Covered				
	nded Coverage				
	nd Marine				
	neowners				
	nmercial Multi-Peril				
	o Hail				
15. Othe	er Line of Insurance		· · · · · · · · · · · · · · · · · · ·		
	Line of Insulative	•			
oes filing	g only apply to certain	in territory(s) oı	certain class(s)? If so, specify:	
Brief desc	cription of filing. (If fi	lling follows rate	es of an adviso	ory organization, specify organgory organger our current loss cost multipliers	าเzสติดก): s for:
aopuon c	Liability =	1.277	and	physical damage = 1.287	
	Licesinity			Garage Dealers = 1.438	
ISO Re	ference Filing #(s):	CA-2009- B	RLA1		

New Hampshire Insurance Company

Name of Company

Joan D. Baskerville, Filings Analyst

^{**} Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/2009 new and 12/01/2009 renewal

(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		4.00/
Passenger Commercia		-4.3%
Automobile Physical Dama Private Passenger Cor		-4.3%
3. Liability Other Than Auto	100,012	4.070
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
 Extended Coverage Inland Marine 		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Brief description of filing. (If filing.)	n territory (territories) or certain classes? If so, specifing follows rates of an advisory organization, specify rised the reference to Credit Based Insurance diffication.	v organization): We have decreased the
morada de la manoria mos	anouton.	
*Adjusted to reflect all prior rate **Change in Company's premit	um level which will result from application of new rat	es. land Casualty Company
		Name of Company
	Amv Ozn	nun - State Filing Consultant
		Official – Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/2009 new and 12/01/2009 renewal

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial	671,382	
	Automobile Physical Damage Private Passenger Commercial	373,790	-4.6%
	Liability Other Than Auto		
	Burglary and Theft		
	Glass Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
10.	Extended Coverage		
11.	Inland Marine		ADMINISTRAÇÃO DE LA CONTRACTOR DE LA CON
	Homeowners		
	Commercial Multi-Peril		www.ar.a.
	Crop Hail		
10.	OtherLine of Insurance		
Doe		(territories) or certain classes? If so, specify	: Public Auto
fact	ef description of filing. (If filing follows fors for New Venture, revised the rucations for Transition Modification.	s rates of an advisory organization, specify reference to Credit Based Insurance S	organization): We have decreased the core and added Driver Factors and
		The state of the s	
	justed to reflect all prior rate changes hange in Company's premium level v	vhich will result from application of new rate	
		Northia	nd Insurance Company Name of Company
			ranie of company
		Amy Ozmi	ın - State Filing Consultant
			Official - Title

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate level p	roduced by rate revision effective	09-8-2009 NB,09-08-2009 RB
(1)	(2)	(3) Percent
Coverage	Annual Premium Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private		5.9%
Passenger Commercial Automobile Physical Damage	\$870,652	5.9%
Private Passenger Commercial	\$307,452	7.7%
Liability Other Than Auto		
Burglary and Theft		
o. Glass		
Fidelity		
SuretyBoiler and Machinery		
. Fire		
Extended Coverage		
1. Inland Marine		
2. Homeowners		
3. Commercial Multi-Peril		
4. Crop Hail		
5. OtherLine of Insurance		
Line of insulance		
Does filing only apply to certain territory (territ	ories) or certain classes? If so, specify	All Territories
Brief description of filing. (If filing follows rates	of an advisory organization, specify o	rganization): Revision of LCN
oner description of filling. (If filling follows rates √A	of all advisory organization, specify o	
W/		
'Adjusted to reflect all prior rate changes. *Change in Company's premium level which	will result from application of new rate	s.
	The Ohio	Casualty Insurance Company
		Name of Company
	Sarah Lawrence	e, Sr. Technician, Regulatory Filing
		Official – Title

FORM (RF-3)

SUMMARY SHEET

Change i	n Company's	premium or	rate leve	I produced b	y rate rev	ision
effective	10/01/2009					

(1)	(2) Annual Premium	(3) Percent
Coverage -	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private	-	
Passenger		
Commercial	337,966	-5.2%
Automobile Physical Damag		
Private Passenger		
Commercial	103,588	2.6%
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril	· · · · · · · · · · · · · · · · · · ·	
Crop Hail		
Other		***************************************
Life of Insurance		
Does filing only apply to certain	n territory (territories) or (certain
Classes? If so,	,	
specify: No. Chan	ge applies statewide.	
Brief description of filing. (If fill	ing follows rates of an ac	lvisory
Organization, specify		-
organization):	Adoption of ISO Designation	n CA-2009-BRLA1
*Adjusted to reflect all prior rat **Change in Company's premi		

OneBeacon America Insurance Company Name of Company Sharon Kennedy, Compliance Analyst Official - Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	te level produced by rate revision
effective 10/01/2009	

	(1)	(2) Annual Premium	(3) Percent
_	Coverage	Volume (Illinois) *	Change (+or-) **
	Automobile Liability Private		
	Passenger		
	Commercial	713	-5.2%
	Automobile Physical Damag		_
	Private Passenger		
	Commercial	126	2.6%
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
	Life of Insurance		
	Does filing only apply to certai Classes? If so,	n territory (territories) or o	certain
	•	ge applies statewide.	
	Brief description of filing. (If fil	ing follows rates of an ad	lvisory
	Organization, specify		
	organization):	Adoption of ISO Designatio	n CA-2009-BRLA1
		· · · · · · · · · · · · · · · · · · ·	
	*Adjusted to reflect all prior rat	e changes.	
	**Change in Company's premi		from application of new
	rates.		and the fact of the second
		OneBeacon Insurar	nce Company
			ne of Company

Sharon Kennedy, Compliance Analyst
Official – Title

Change in Compa	any's premium or rate level p	produced by rate revision effective	09-01-2009 NB, 11-1-2009 RB
	(1)	(2) Annual Premium	(3) Percent <u>Change (+ or -)**</u>
<u>u</u>	<u>overage</u>	Volume (Illinois)*	Change (+ or -)
1. Automobile L	iability Private		
	er Commercial	\$1,389,547	5.7%
	Physical Damage		
		\$14,803	13.0%
3. Liability Othe		, , , , , , , , , , , , , , , , , , ,	
4. Burglary and			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Ma	achinery		
9. Fire		· · · · · · · · · · · · · · · · · · ·	
10. Extended Co	verage	····	
11. Inland Marine			
12. Homeowners			
13. Commercial	Multi-Peril		
14. Crop Hail			
15. Other			milet
	Line of Insurance		
Does filing only a	pply to certain territory (territ	ories) or certain classes? If so, specify:	All territories.
·	v , v	s of an advisory organization, specify or	ganization):
Revision of Commerci	al Cars LCMs.		
	ct all prior rate changes.		
**Change in Com	pany's premium level which	will result from application of new rates	5.
			demnity Insurance Company
		1	Name of Company
		Sarah Lawrence	e, Sr. Technician, Regulatory Filing
			Official – Title

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

	(1)	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
	<u>Coverage</u>	volume (minois)	Onange (· or)
	Automobile Liability Private		
	Passenger Commercial	\$928,064	5.1%
•	Automobile Physical Damage		
	Private Passenger Commercial	\$303,003	12.1%
.			
٠.	Burglary and Theft		
.	Glass		
i .	Fidelity		
' .	Surety		
3.	Boiler and Machinery		
).	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
5.	Other		
	Line of Insurance		
	61:	torios) ou contain alabase 2 lf as anacid	at All Annihouing
0	es filing only apply to certain territory (terri	tories) or certain classes? It so, specify	All territories.
	and the state of t		
	ef description of filing. (If filing follows rates	s of an advisory organization, specify o	rganization):
 3ri			
	ision of Commercial Cars LCMs.		
	ision of Commercial Cars LCMs.		
Rev			
Ac	ljusted to reflect all prior rate changes.		
Ac		will result from application of new rate	s.
Ac	ljusted to reflect all prior rate changes.		
Ac	ljusted to reflect all prior rate changes.		less Insurance Company
Ac	ljusted to reflect all prior rate changes.		
Ac	ljusted to reflect all prior rate changes.	Peer	less Insurance Company

FORM (RF-3)

Change in Company's premium or ra	ate level produced by rate revision
effective 10/01/2009	

-	(1)	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Coverage - Automobile Liability Private	volume (minors)	Change (101-)
١.	•		
	Passenger	200.014	0.004
^	Commercial	296,214	-3.8%
2	Automobile Physical Damag		•
	Private Passenger		
^	Commercial	96,610	12.1
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
ô.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		AND THE RESERVE OF THE PARTY OF
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
		sion will apply to all territories sta	atewide
	specify.	don will apply to all territorios ou	
	Brief description of filing. (If file Organization, specify organization):	-	dvisory s cost revision, CA-2009-BRLA1. As
	prescribed by our company rate indication	n, we are increasing our loss cost n	nultipliers in order to keep our rates flat.
	<u> </u>		
	*Adjusted to reflect all prior ra **Change in Company's premates.	te changes. ium level which will resul	t from application of new
		Pharmacists Mutua	I Insurance Company
		Nar	ne of Company
		Janine M MacVey, f	Rate Analyst
			Official – Title

FORM (RF-3)

	(1) Coverage	(2) Annual Premium - Volume (Illinois) *	(3) Percent Change (+or-) **
•	Automobile Liability Private Passenger		
	Commercial	4581,748	-5.2%
	Automobile Physical Damag Private Passenger		•
	Commercial	\$261,324	2.6%
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire	,	·
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril	,	
	Crop Hail		
	Other		
	Life of Insurance		
	Does filing only apply to certa Classes? If so,	ain territory (territories) o	r certain
	specify: No No		
	Brief description of filing. (If Organization, specify	filing follows rates of an	advisory
	Brief description of filing. (If Organization, specify organization):		advisory es Office, filed under Filing Designation Nun
	Organization, specify	Adoption of Insurance Service	•
	Organization, specify organization): CA-2009-BRLA1 to be effective 10/1/09	Adoption of Insurance Service	•
	Organization, specify organization): CA-2009-BRLA1 to be effective 10/1/05 *Adjusted to reflect all prior reflect all	Adoption of Insurance Service Adoption of Insurance Service Adoption of Insurance Service Adoption of Insurance Service Adoption of Insurance Service	es Office, filed under Filing Designation Nur
	Organization, specify organization): CA-2009-BRLA1 to be effective 10/1/09 *Adjusted to reflect all prior reflect.	Adoption of Insurance Service ate changes. mium level which will res Praetorian Insura	es Office, filed under Filing Designation Nur ult from application of new unce Company
	Organization, specify organization): CA-2009-BRLA1 to be effective 10/1/05 *Adjusted to reflect all prior reflect all	Adoption of Insurance Service ate changes. mium level which will res Praetorian Insura	es Office, filed under Filing Designation Nur ult from application of new

FORM (RF-3)

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
•	Automobile Liability Private Passenger		
	Commercial	\$2,558,681	-5.2%
	Automobile Physical Damag Private Passenger		•
	Commercial	\$565,399	2.6%
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
•	Surety		
•	Boiler and Machinery		
_	Fire		
0.	Extended Coverage		
1.	Inland Marine		
2. 3.	Homeowners		
ა. 4.	Commercial Multi-Peril		
ч. 5.	Crop Hail		
J.	Other Life of Insurance		
•	Does filing only apply to certa Classes? If so, specify: No	ain territory (territories) c	or certain
	Brief description of filing. (If Organization, specify	filing follows rates of an	advisory
	organization):	Adoption of Insurance Service	ces Office, filed under Filing Designation Number
	CA-2009-BRLA1 to be effective 10/1/09).	
	*Adjusted to reflect all prior r **Change in Company's prer rates.		sult from application of new
		Redland Insuran	
		•	lame of Company
		Pamela Alt - Vio	ce President - Compliance
			Official – Title

FORM (RF-3)

Change in Company's premium	or rate leve	I produced by	rate revision
effective 8/1/2009- new and renewal			

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private	- voidino (initioto)	
	Passenger		
	Commercial	1550000	+3.0
2	Automobile Physical Damag		
	Private Passenger		
	Commercial	180000	+3.0
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Life of Insurance		
	Life of insurance		
•	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: NO		
	Brief description of filing. (If for Organization, specify organization): ISO is advisory organization and circular	Adoption of ISO advisory lo	oss costs and revised loss cost multipliers
	*Adjusted to reflect all prior ra **Change in Company's prem		It from application of new
	rates.	0	
		Society Insurance	ma of Company
		Na Dennis Saldana- S	me of Company
			Official – Title
		•	Onicial – Title

Change in	Company's	premium	or	rate	level	produced	by	rate
revision	effective	Septembe	r 1	, 200	9			

(1)	(2) Annual Premium	(3) Percent			
Coverage	Volume (Illinois) *	Change (+ or -)**			
1. Automobile Liability					
Private Passenger					
Commercial	\$25,981,555	-3.1%			
2. Automobile Physical Damage					
Private Passenger					
Commercial	\$7,307,108	2.2%			
3. Liability Other Than Auto					
4. Burglary and Theft					
5. Glass					
6. Fidelity					
7. Surety					
8. Boiler and Machinery					
9. Fire	<u> </u>				
10. Extended Coverage					
11. Inland Marine					
12. Homeowners					
13. Commercial Multi-Peril					
14. Crop Hail					
15. Other					
Line of Insurance					
Does filing only apply to certain If so, specify: 112, 113, 115, 1					
139, 140, 141, 142, 143, 144, 145,	, 146				
" - " · · · · · · · · · · · · · · · · ·		·			
Brief description of filing. (If	filing follows rates of a	n advisory			
organization, specify organization					
organización, specif, organización	i, indepersion of the feet	CODED GIR TUTO			
revisions.					
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	vel which will				
TRA	NSGUARD INSURANCE COMPANY				
Name of Company					
	Joyelle Endres - Compliance Official - Tit				

Change in Company's premium or rate level	produced by rate revision effective	4-1-2010
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial	\$833,406	0%
Automobile Physical Damage Private Passenger Commercial	\$205,637	0%
Liability Other Than Auto		
r 01		
O = 1 + 111		
8. Boiler and Machinery		
9. Fire		
14. Crop Hail		
15. OtherLine of Insurance	- Adams - Adam	
Line of Insurance		
Does filing only apply to certain territory (ter	ritories) or certain classes? If so, speci	fy:
Bood iming only apply to contain territory (to		
		A all and
Brief description of filing. (If filing follows rate Comm Auto Schedule Rating Plan Revision	es of an advisory organization, specify	organization):
Comm Auto Schedule Rating Plan Revision	to 50% credit of debit.	and the state of t
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	th will result from application of new rat	tes.
	Mouseu F	Business Insurance Company
	vvausau E	Name of Company
	Lori Hartleben	Senior State Filings Analyst
		Official – Title

Change in Company's premium or rate level produced by rate revision effective		12-1-2009	
(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private Passenger Commercial	\$207,586	-9.2%	
Automobile Physical Damage		0.00/	
Private Passenger Commercial	\$59,794	0.9%	
·			
14. Crop Hail			
15. OtherLine of Insurance		And the second s	
	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	.	
Does filing only apply to certain territory (terri	itories) or certain classes? It so, specii	y:	
Brief description of filing. (If filing follows rate	s of an advisory organization, specify	organization):	
Adopt ISO Loss Costs and amend LCMS's			
		- 1985 W	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which			
Wausau Business Insurance Company			
		Name of Company	
	Lori Hartleben	Senior State Filings Analyst	
		Official – Title	

Change in Company's premium or rate level produced by rate revision effective		12-1-2009	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private Passenger Commercial	\$0	-9.2%	
2. Automobile Physical Damage			
	\$0	0.9%	
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. OtherLine of Insurance		A Section Assessment Control of the	
Line of insurance			
Does filing only apply to certain territory (territories) or certain classes? If so, spec	ifv:	
and a surface of the second se			
Brief description of filing. (If filing follows	rates of an advisory organization, specify	organization):	
Adopt ISO Loss Costs and amend LCMS			
*Adjusted to reflect all prior rate changes **Change in Company's premium level w		tes.	
3			
	Wausau General Insurance Company		
		Name of Company	
	<u>Lori Hartleben</u>	Senior State Filings Analyst	
		Official – Title	

Change in Company's premium or rate level produced by rate revision effective		effective	4-1-2010	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>		(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial	\$1,014,619		0%
2.	Automobile Physical Damage			00/
_	Private Passenger Commercial			0%
3.	Liability Other Than Auto Burglary and Theft			
	Glass			
	Fidelity			
	Surety			
	Boiler and Machinery			
_	Fire			
	Extended Coverage			
	. Inland Marine . Homeowners			
	. Commercial Multi-Peril			
	. Crop Hail			
15	. Other Line of Insurance			
	Line of Insurance			
D-	es filing only apply to certain territory (territories) er certain classes?	If so specify:	
DC	es liling only apply to certain territory (termones) or certain classes:	ii so, specify	
Bri	ef description of filing. (If filing follows	rates of an advisory organizat	ion, specify ora	anization):
Co	omm Auto Schedule Rating Plan Revis	ion to 50% credit or debit.	, o, i, up a a.i, j a i a	,
*A	djusted to reflect all prior rate changes			
**(Change in Company's premium level w	hich will result from application	n of new rates.	
			Wausau Hnden	writers Insurance Company
				ame of Company
				• •
		<u>Lori Harti</u>	eben	Senior State Filings Analyst
				Official - Title

Change in Company's premium or rate level	produced by rate revision effective	12-1-2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial	\$441,778	-9.1%
2. Automobile Physical Damage	\$111,243	1.0%
3. Liability Other Than Auto		1.070
4 Duralam, and That		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
0 Eiro		
40 Estandad Casanana		
A.A. Andrewski A.A. of the		
40 Henry		
12 Commercial Multi Davil		
14 Crop Hoil		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (terr	itories) or certain classes? If so, specify	<i>/</i> :
Tool ming only apply to contain termony (term		
Brief description of filing. (If filing follows rate	es of an advisory organization, specify o	organization):
Adopt ISO Loss Costs and amend LCMS's		
*Adjusted to reflect all prior rate changes.	b will see it from application of powerto	•
**Change in Company's premium level which	i will result from application of new rate	5.
	Maugauthad	erwriters Insurance Company
	vvausau Onu	Name of Company
		Tame of Company
	Lori Hartleben	Senior State Filings Analyst
		Official – Title

Ch	ange in Company's premium or rate leve	el produced by rate revision effective	09-8-2009 NB,09-08-2009 RB
	(1)	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
	<u>Coverage</u>	volume (minois)	Onlinge () Or 1
1.	Automobile Liability Private		
	Passenger Commercial	\$655,632	6.0%
2.	Automobile Physical Damage		
	Private Passenger Commercial	\$227,242	7.7%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity _		
7.	Surety _		
8.	Boiler and Machinery		
9.	Fire _		
	Extended Coverage _		
	Inland Marine		
	Homeowners _		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Do	os filing only apply to cortain territory (to	rritories) or certain classes? If so, specify:	All Territories
טט	es ming only apply to certain termory (te	milones/ or certain classes: if so, specify.	All Territories
Bri	ef description of filing. (If filing follows ra	tes of an advisory organization, specify org	anization): Revision of LCMs
N/A			4.1447.4
		INVESTIGATION CONTRACTOR CONTRACT	And the state of t
*A	djusted to reflect all prior rate changes.		
**0	Change in Company's premium level whi	ch will result from application of new rates.	
		West Ame	rican Insurance Company
		N:	ame of Company
		Sarah Lawrence,	Sr. Technician, Regulatory Filing
			Official – Title